

Background

- The period following hospitalization remains a particularly vulnerable time for patients. Discharge phone calls are an outlet for patients to express any concerns related to their hospitalization and postoperative period.
 - Compliance with discharge phone calls has been a challenge for the PACU nurses. Historically a nurse has been designated for discharge phone calls but is often pulled from calls to provide patient care.
 - Previous practice was to use the physical charts as a guide on what calls need to be completed.
 - Patients complaints of “why receiving call many days later”
 - Hand & Cunningham, 2014 explain that patients report high levels of satisfaction by nurse led follow up (p.50).
- (P)** In G3 PACU **(I)** Does implementation of a required 3 discharge phone call per nurse approach utilizing Patient Call Manager **(C)** improve the compliance of discharge phone calls attempted and completed compared to pre-intervention levels **(O)** increasing RN awareness, proactivity, and compliance, and ultimately improving the patient experience **(T)** Over three month period **(S)** in G3 PACU.

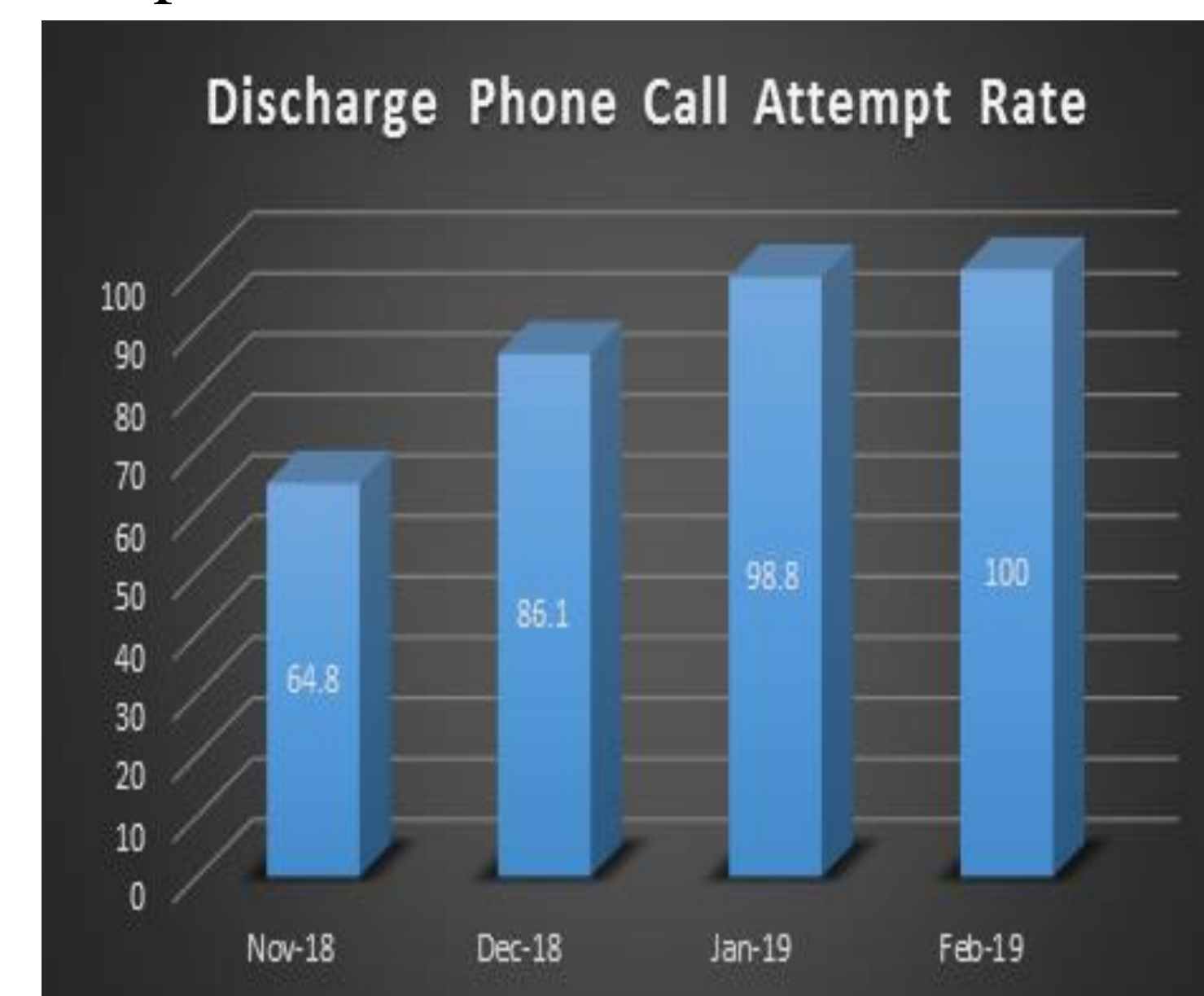
Methods

- Education focused on:
 - Utilizing the patient call manager list to complete calls instead of our previous method which was using physical discharged charts.
 - It was also crucial that we used the EMR prior to initiating call to determine if a procedure was completed or not completed.
- Each nurse was asked to complete three calls daily.
- Daily broadcasts via MHB were used as a reminder to complete calls
- Data collection period
 - Started collecting 11/18
 - Completed 03/19
- Data was collected using the Weill Cornell Call Manager Report and analyzing the values of “percent attempted, percent completed, and number of discharges home.”
- Reports of compliance posted weekly to ensure transparency and encourage further compliance.
- Analysis of the data included
 - Thorough discussion of the results as it related to current practice vs a proposed new practice of completing discharge follow up calls.

Results



- The results show an improvement from the discussion phase of the project, initial interventions, and post intervention date.
 - Observable evidence of nurses proactively completing discharge phone calls everyday.
 - Reminders observed to be broadcasted by team leaders.
 - Meeting the patients needs by completing phone calls in a timely manner when the follow calls mean and benefit the patient the most. Ultimately benefiting the patient experience.



Discussion

- We found that providing education and daily reminders greatly improved the compliance with completing calls.
- Providing staff with caller statistics contributed to success.
- Limitations to this study may include the workflow of the PACU such as patient flow, number of cases per day, staffing, and unpredictable factors relating to patient care.
- Recommendations include working closer with admitting to ensure cancelled cases do not appear on patient call manager.



References

Hand, K. E., & Cunningham, R. S. (2013). Telephone Calls Post Discharge From Hospital to Home: A Literature Review. *Clinical Journal of Oncology Nursing*, 18(1), 45-52. doi:10.1188/14.cjon.18-01ap

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